



SB 728 (S-1) TESTIMONY

Revise Michigan Childhood Immunization Registry

House Health Policy Committee

February 21, 2006

This written testimony is provided to the Michigan House Health Policy Committee in support of SB-728 on behalf of the *Get the Lead Out!* collaborative of Kent County. *Get the Lead Out!* is a multi-agency coalition of more than two dozen organizations coming from sectors as diverse as housing, medical, child development, the environment, community, and more. Our vision is to end childhood lead poisoning in Kent County by the year 2010.

Our coalition urges your support for SB 728. This bill will allow the State and its partners to take an existing tool, the Michigan Childhood Immunization Registry (MCIR), and leverage its effectiveness towards other long-standing problems such as childhood lead poisoning. Including blood lead testing data in the MCIR will have two primary benefits,

- 1) costly and painful duplicate testing can be avoided, and
- 2) data can be made immediately available in public clinics and private practices across the state to help ensure that children in need of treatment do not slip through the cracks.

The *Get the Lead Out!* coalition hears constantly from west Michigan pediatricians, physicians and other health care professionals about how helpful it would be to include blood lead testing information (dates, results, recommended follow-up) in the MCIR. Unnecessary costs will be saved as the duplicative testing that comes as a result of not having timely access to blood lead testing information is eliminated. Nor will children have to undergo the stress of having an unnecessary blood draw.

Childhood lead poisoning prevention advocates support this bill because the MCIR works. It is a proven public health tool that gets results. It is protected, it is safe, and it has been instrumental in bringing Michigan's immunization rates up to some of the finest in the nation. With the

proposed changes, the MCIR database will continue to operate so that public health information is strictly protected and access is granted *only* to those responsible for protecting public health.

If implemented in the next few months, Medicaid plans will easily be able to reach their 2004 legislative mandate to test 80% of all Medicaid children by 2007. Further, this change will increase testing for the non-Medicaid population that makes up the majority of children seen by pediatricians and family physicians—*testing that happens with no additional cost to the State.*

As proposed, the changes to this legislation are modest and allow us to quickly make the changes needed to protect thousands of Michigan's children from the 100% preventable issue of childhood lead poisoning. We encourage you to pass this bill as soon as possible.

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